


Please type a plus sign (+) inside this box → 

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No. A35306-A 069906.0161	
	First Inventor Lloyd G. Mitchell	
	Title	SPLICEOSOME * see attached
	Express Mail Label No. EV342493619US	

17537 U.S. PAT. & TM. OFF. 10/62/1867 07/17/03

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.		<b>ADDRESS TO:</b> Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <b>67</b> ] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description <input checked="" type="checkbox"/> Claim(s) [Total Sheets <b>18</b> ] <input type="checkbox"/> Abstract of the Disclosure [Total Sheets <b>1</b> ] 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>27</b> ] 5. Oath or Declaration [Total Pages <b>1</b> ] a. <input checked="" type="checkbox"/> Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) b. <input type="checkbox"/> (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies <b>ACCOMPANYING APPLICATION PARTS</b> 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other:	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 10/198,447, filed July 17, 2002 Prior application information: Examiner Group Art Unit: 1635			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
<b>19. CORRESPONDENCE ADDRESS</b> <input checked="" type="checkbox"/> Customer Number or Bar Code Label <b>21003</b> or <input type="checkbox"/> Correspondence address below <i>(Insert Customer No. or Attach bar code label here)</i>			
Name _____ Address _____ City _____ State _____ Zip Code _____ Country _____ Telephone _____ Fax _____			
Name (Print/Type) Carmella L. Stephens		Registration No. (Attorney/Agent) 41,328	
Signature <i>Carmella L. Stephens</i>		Date 7/17/03	

**Addendum Sheet 1****\*Question 4 Addendum**

4.a. Drawings are ☐ formal ☒ informal

**\* Question 5 Addendum**

5.c. ☒ An unsigned oath or declaration is included.

**\* Question 8 Addendum**

8.d. ☐ A sequence submission will follow.

**\* Question 9 Addendum**

9.a. ☒ Assignment documents will follow.

9.b. ☐ Assignment documents have been filed in parent application No.

**\* Question 11 Addendum**

11.a. ☐ English translation will follow.

**\* Question 12 Addendum**

12.a. ☐ Copies of IDS citations will follow.

**\* Question 15 Addendum**

15.a. ☐ Certified copies of priority documents will follow.

15.b. ☐ Certified copies of priority documents have been filed in parent application No.

Use the space below for additional information

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Title (continued):

SPLICEOSOME MEDIATED RNA TRANS-SPLICING FOR CORRECTION OF SKIN DISORDERS

## Addendum Sheet 2

18a. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

18b. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

18c. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

☐ Amend the specification by inserting before the first line the sentence(s)

☐ "This application is a ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of:

☐ "This application is based upon:

prior application No.: \_\_\_\_\_, incorporated by reference herein,

☐ which is a ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of:

☐ which is based upon:

prior application No.: \_\_\_\_\_, incorporated by reference herein,

☐ which is a ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of:

☐ which is based upon:

prior application No.: \_\_\_\_\_, incorporated by reference herein,

☐ which is a ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of:

☐ which is based upon:

prior application No.: \_\_\_\_\_, incorporated by reference herein,

☐ which is a ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of:

☐ which is based upon:

prior application No.: \_\_\_\_\_, incorporated by reference herein,

☐ which is a ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of:

☐ which is based upon:

prior application No.: \_\_\_\_\_, incorporated by reference herein

Priority under 35.U.S.C. §119 is claimed based upon the following applications.

## Foreign Applications:

Country: \_\_\_\_\_ Serial No: \_\_\_\_\_ Filing Date: \_\_\_\_\_

Country: \_\_\_\_\_ Serial No: \_\_\_\_\_ Filing Date: \_\_\_\_\_

Country: \_\_\_\_\_ Serial No: \_\_\_\_\_ Filing Date: \_\_\_\_\_

## Provisional Applications:

Serial No: \_\_\_\_\_ Filing Date: \_\_\_\_\_

Serial No: \_\_\_\_\_ Filing Date: \_\_\_\_\_

Serial No: \_\_\_\_\_ Filing Date: \_\_\_\_\_

## FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$1,697

### Complete if Known

Application Number	to be assigned
Filing Date	July 17, 2003
First Named Inventor	Lloyd G. Mitchell
Examiner Name	to be assigned
Art Unit	to be assigned
Attorney Docket No.	A35306-A 069906.0161

### METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit  
Account  
Number  
Deposit  
Account  
Name

02-4377

Baker Botts LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

### FEE CALCULATION

#### 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	375
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$ 375

#### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
86	- 20 = 66	X 9	= 594
Independent Claims	17	- 3 = 14	X 42 = 588
Multiple Dependent		140	= 140

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 1,322

\*\*or number previously paid, if greater; For Reissues, see above

### FEE CALCULATION (continued)

#### 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$0

### SUBMITTED BY

(Complete if applicable)

Name (Print/Type)	Carmella L. Stephens	Registration No. (Attorney/Agent)	41,328	Telephone	212.408.2539
Signature	Carmella L. Stephens	Date	July 17, 2003		

**CERTIFICATION UNDER 37 C.F.R. 1.8(a) OR 1.10\***

*(When using Express Mail, the Express Mail label number is mandatory; Express Mail Certification is optional.)*

I hereby certify that, on the date shown below, this correspondence is being:

**MAILING**

☐ deposited with the United States Postal Service in an envelope addressed to the  
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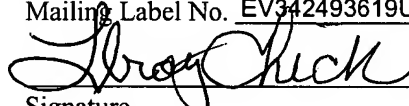
**37 C.F.R. 1.8(a)**

☐ with sufficient postage as first class mail.

**37 C.F.R. 1.10\***

☒ as "Express Mail Post Office to Address"

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Signature

Date: July 17, 2003

Leroy Chick

*(type or print name of person certifying)*

**\*WARNING:** Each paper of fee filed by "Express Mail" must have the number of the "Express Mail" mailing label placed thereon prior to mailing 37 C.F.R. 1.10(b).  
"Since the filing of correspondence under § 1.10 without the Express Mail label thereon is an oversight that can be avoided by the exercise of reasonable care, requests for waiver of this requirement will not be granted on petition. "Notice of Oct. 24, 1996, 60 Fed. Reg. 56,439, at 56,442.